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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u></u>
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Steve	
		First name	First name
	Write the name that is on	R	
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	McAlister	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Jr Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
_	have used in the	First name	First name
	last 8 years		
	Include your married or maiden names.	Middle name	Middle name
	madernames.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	XXX - XX- <u>8972</u>	xxx - xx-
	Social Security number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor 1 Steve First Name	R Middle Name	McAlister Last Name	Case number (if known)
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any busin	ness names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the	Business name		Business name
last 8 years	Business name		Business name
Include trade names and doing business as names	EIN		EIN
	EIN		EIN
5. Where you live	407 E. Center		If Debtor 2 lives at a different address:
	Number Street		Number Street
	Glenwood Illinois City State	60425 Zip Code	City State Zip Code
	Cook		_
		lifferent from the one above, urt will send any notices to you at	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street		Number Street
	City State	e Zip Code	City State Zip Code
6. Why you are choosing this district to file for bankruptcy	lived in this district longe	efore filing this petition, I have er than in any other district. xplain. (See 28 U.S.C. §§ 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Steve First Name	R Middle Name	McAlister Last Name		Case number (if know	m)
Part 2: Tell the Court Ab	out Your Bankrup	tcy Case			
7. The chapter of the Bankruptcy Code you are choosing to file under		ef description of each, see <i>Notic</i> e e top of page 1 and check the ap		-	(b) for Individuals Filing for Bankruptcy (Form
8. How you will pay the fee	court for more may pay with on your behalf I need to pay Individuals to I I request that By law, a judg less than 1509 the fee in insta	details about how you make cash, cashier's check, or your attorney may pay we the fee in installments. Pay Your Filing Fee in Install my fee be waived (You we may, but is not required of the official poverty limited.	ay pay. To money on with a creal of you che allments (may request to, waive that aphis option	rypically, if you rder If your a dit card or checoose this option Official Form 10 est this option e your fee, and oplies to your fan, you must fill of the results.	only if you are filing for Chapter 7. may do so only if your income is amily size and you are unable to pay but the <i>Application to Have the</i>
9. Have you filed for bankruptcy within the last 8 years?	No. Yes. District District District	Northern District of Illinois	When When	6/11/2014 MM / DD / YYYY MM / DD / YYYY	Case number 13-22078 Case number Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor		When When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11. Do you rent your residence?	✓ No. o	2. ndlord obtained an eviction judgn Go to line 12. fill out <i>Initial Statement About an</i> nis bankruptcy petition.			

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Debt			R	dle Name		cAlister		Case number (if known	<i></i>		
	First Name	_				st Name					
p fı	Report About Any re you a sole roprietor of any ull- or part-time usiness?	y Bus	No.	Go to Part		•	etor				
is o ir a e c p If th p s	a sole proprietorship is a business you perate as an individual, and is not separate legal intity such as a orporation, artnership, or LLC. If you have more nan one sole roprietorship, use a eparate sheet and ttach it to this etition.			City Check the Sir Sto		ox to describ ness (as defi I Estate (as defined in 11 Uer (as defined	State De your busing ined in 11 U.S defined in 11 J.S.C. § 1010	S.C. § 101(27A)) U.S.C. § 101(51B)) (53A))	Zip Code		
C B a	re you filing under thapter 11 of the sankruptcy Code nd are you a small business debtor?	dead opera	lines. If y ations, ca	ou indicate	that you are a	small busines	ss debtor, you	ou are a small busines I must attach your mos if any of these docum	st recent balance		1
s d	for a definition of mall business ebtor, see 11 U.S.C. 101(51D).		No. No. Yes.	I am filing Bankrupto	cy Code.	11, but I am		I business debtor according		inition in the in the Bankruptcy Code.	
Part	4: Report if You Ow	n or I	Have A	Any Haza	ardous Prop	perty or A	ny Propei	ty That Needs In	nmediate At	tention	
a p to ir	o you own or have ny property that oses or is alleged pose a threat of mminent and dentifiable hazard			What is the	hazard? e attention is ne	eded, why is	it needed?				
t s c t	to public health or safety? Or do you own any property that needs immediate attention?			Where is th	e property? N	lumber		Street			
o o b tl	for example, do you wn perishable goods, r livestock that must e fed, or a building that needs urgent epairs?				ō	City		State		Zip Code	

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Debtor 1 Steve McAlister Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the

internet, even after I reasonably tried

I am currently on active military duty in

a military combat zone.

to do so.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

Active duty.

credit counseling with the court.

internet, even after I reasonably tried

I am currently on active military duty in

a military combat zone.

to do so.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

Active duty.

credit counseling with the court.

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16. What kind of debts do you have? 16. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 10(16) as 'incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. Yes. Lan fling under Chapter 7, Go to line 18. Yes. Lan fling under Chapter 7, Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? Yes. How many creditors do you estimate that you owe? 10.00-19. 10.001-25.000 50.001-100.000 Yes. How much do you estimate your assets to be worth? 1.49 1.000-5.000 25.001-50.000 50.001-100.000 100.019. 100.019. 100.019. 100.001-350 million \$500.000.01-351 billion \$500.001-31 billion \$500.001-31 billion \$500.001-31 billion \$500.001-31 billion \$500.001-31 billion \$100.001-350 million \$100.000.001-350 million \$100.000.001-310 billion	Debtor 1 Steve	R Middle Name	McAlister Last Name	Case number (if known)
16. What kind of debts do you have? 16a Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 17b No. Go to line 16b. 17c Ne your dibts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. 17c Ne your dilling under Chapter? Inc. State the type of debts you owe that are not consumer debts or business debts. 17c Are your dilling under Chapter? Go to line 18. 17c No. I am nort filing under Chapter? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? 18c How many creditors? 18c How many creditors? 18c How much do you estimate that you owe? 19c How much do you estimate that you assets to be worth? 19c Soo.000.5100,000	First Name				
Chapter 77 Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Ves. I am filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? No. Ves.	16. What kind of debts	16a. Are your debts primar 101(8) as "incurred by a No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primar obtain money for a bus investment. No. Go to line 16c. ✓ Yes. Go to line 17.	rily consumer debt an individual primar rily business debts iness or investment	ily for a personal, far s? Business debts ar or through the opera	nily, or household purpose." e debts that you incurred to ation of the business or
do you estimate that you owe? 100-199	Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to	Yes. I am filing under Chapter paid that funds will be available. No. Yes.	7. Do you estimate that af		excluded and administrative expenses are
estimate your assets to be worth? \$50,001-\$100,000	do you estimate that	50-99 100-199	5,001-10	,000	50,001-100,000
estimate your liabilities to be? \$50,001-\$100,000 \$10,000,001-\$50 million \$10,000,000,001-\$10 billion \$10,000,001-\$100 million \$10,000,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion More than \$50 billion \$100,000,001-\$100 million \$100,000,001-\$100 million More than \$50 billion \$100,000,001-\$100 million \$100,000	estimate your assets	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,0 \$50,000,0	001-\$50 million 001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	estimate your	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,0 \$50,000,0	001-\$50 million 001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud ir connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	Part 7: Sign Below				
/s/ Steve McAlister Signature of Debtor 1 Executed on1/1/18/2016 Signature of Debtor 2 Executed on	For you	and correct. If I have chosen to file under 11,12, or 13 of title 11, Unite choose to proceed under Chalf no attorney represents me me fill out this document, I half request relief in accordance I understand making a false connection with a bankruptcy years, or both. 18 U.S.C. §§	r Chapter 7, I am aved States Code. I unapter 7. e and I did not pay on ave obtained and rewith the chapter of statement, concealing case can result in 152, 1341, 1519, and	ware that I may procederstand the relief avoragree to pay some ead the notice require f title 11, United Stationary property, or obtain fines up to \$250,000 and 3571.	eed, if eligible, under Chapter 7, vailable under each chapter, and I one who is not an attorney to help ed by 11 U.S.C. § 342(b). es Code, specified in this petition. ning money or property by fraud in the company of the company o

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Debtor 1 Steve	R	McAlister	Case number	(if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one If you are not represented by an attorney, you do not	eligibility to proceed up the relief available und to the debtor(s) the no	nder Chapter 7, 11, der each chapter fo tice required by 11	12, or 13 of title 11, Ur which the person is U.S.C. § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
need to file this page.	/s/ Amy Gerstein Signature of Attorney	for Debtor	Date	11/18/2016 MM / DD / YYYY
	Amy Gerstein Printed name Semrad Law Firm			
	Firm name 11101 S. Western Ave	nue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3128374023	Email address	agerstein@semradlaw.com
			Illin	ois
	Bar number		Stat	

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Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Steve First Name	R Middle Name	McAlister Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	Northern	District of Illinois(State)			
Case number (If known)			(State)			

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$8,437.00
1c. Copy line 63, Total of all property on Schedule A/B	\$8,437.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$9,077.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$58,072.00
Your total liabilities	\$67,149.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,529.50
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$3,514.00

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Debt	tor 1 Steve	R	McAlister	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	4: Answer These Q	uestions for Administ	rative and Statistical Rec	cords	
6. A ı	re you filing for bankrup	cy under Chapters 7, 11, or	13?		
	No. You have nothing to	o report on this part of the form	Check this box and submit this f	form to the court with your other schedules	
ŀ	✓ Yes.				
7. W	hat kind of debt do you	have?			
[-	mer debts are those incurred by a out lines 8-10 for statistical purp	an individual primarily for a personal, oses. 28 U.S.C. § 159.	
		imarily consumer debts. You theyour other schedules.	u have nothing to report on this p	art of the form. Check this box and submit	
		Your Current Monthly Incom Form 122B Line 11; OR, Form	ne: Copy your total current month n 122C-1 Line 14.	nly income from Official	\$3,492.33
9.	Copy the following spe	cial categories of claims fro	om Part 4, line 6 of Schedule E/	F:	
	From Part 4 on Schedu	le E/F, copy the following:		Total claim	
	9a. Domestic support obli	gations (Copy line 6a.)		\$0.00	
	9b. Taxes and certain other	er debts you owe the governme	ent. (Copy line 6b.)	\$0.00	
	9c. Claims for death or pe	rsonal injury while you were ir	ntoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy	ine 6f.)		\$0.00	
	0 0		r divorce that you did not report a	\$0.00	
	9f. Debts to pension or pr	ofit-sharing plans, and other s	similar debts. (Copy line 6h.)	\$0.00	
	On Total Add lines Oa th		(2.17)	\$0.00	

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Fill in this information to identify your case:					
Debtor 1	Steve	R	McAlister		
	First Name	Middle Name	Last Name	,	
Debtor 2					
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number					
(If known)					

Official Form 101A

Initial Statement About an Eviction Judgment Against You

12/15

F	ile this form with th	e court and	serve a copy on your landlord when you first file bankruptcy only if:
	•	obtained a	judgment for possession in an eviction, unlawful detainer action, or iction judgment) against you to possess your residence.
	Landlord's name		
	Landlord's address		
		Number	Street

If you want to stay in your rented residence after you file your case for bankruptcy, also complete the certification below.

ZIP Code

Part 1: Certification About Applicable Law and Deposit of Rent I certify under penalty of perjury that: Under the state or other nonbankruptcy law that applies to the judgment for possession (eviction judgment), I have the right to stay in my residence by paying my landlord the entire delinquent amount. I have given the bankruptcy court clerk a deposit for the rent that would be due during the 30 days after I file the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). /s/ Steve McAlister Signature of Debtor 2 Signature of Debtor 1 Date 11/18/2016 Date MM/ DD / YYYY Stay of Eviction: (a) First 30 days after bankruptcy. If you checked both boxes above, signed the form to certify that both apply, and served your landlord with a copy of this statement, the automatic stay under 11 U.S.C. ยง 362(a)(3) will apply to the continuation of the eviction against you for 30 days after you file your Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). (b) Stay after the initial 30 days. If you wish to stay in your residence after that 30-day period and continue toprotection of the automatic stay under 11 U.S.C. ยง 362(a)(3), you must pay the entire delinquent amount to your landlord as stated in the eviction judgment before the 30-day period ends. You must also fill out Statement About Payment of an Eviction Judgment Against You (Official Form 101B), file it with the bankruptcy court, and serve your landlord a copy of it before the 30-day period ends.

Check the Bankruptcy Rules (www.uscourts.gov/rulesandpolicies/rules.aspx) and the local court's website (to find your court's website, go to www.uscourts.gov/Court_Locator.aspx) for any specific requirements that you might have to meet to serve this statement.

11 U.S.C. §§ 362(b)(22) and 362(l)

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Fill in this	information to identify your ca	se:					
Debtor 1	Steve	R		McAlister			
	First Name	Middle Na	ame	Last Name			
Debtor 2 (Spouse,	if filing) First Name	Middle Na	ame	Last Name			
	ates Bankruptcy Court for the:	Northern		District of Illinois			
Officed Sta	ates bankruptcy Court for the.	Northern		(State)			
Case num (If known)	nber					,	
Officia	al Form 106A/B						Check if this is an amended filing
Sche	dule A/B: Prop	erty					12/1
category v responsib write your Part 1:	where you think it fits best. I le for supplying correct info name and case number (if I Describe Each Reside	Be as complete and ormation. If more sp known). Answer eve nce, Building, L	accurate pace is ne ery question and, or	only once. If an asset fits in masset sits in masset sits in massed, attach a separate sheet on. Other Real Estate You ence, building, land, or similar.	eople are to this for Own or	filing together, both are on the corm. On the top of any and the top of any and the core and the	equally
	No. Go to Part 2 Yes. Where is the property?						
1.1	Street address, if available, of Number Street City State	or other description Zip Code	Single Duple Condo Manui Land Invest Times Other Who has one. Debto Debto		Check	Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? Describe the nature of interest (such as fee sinthe entireties, or a life of the continuous con	d claims on Schedule D: ims Secured by Property. Current value of the portion you own? your ownership mple, tenancy by estate), if known.
			Other info	ormation you wish to add ab identification number:	out this ite	em, such as local	
If you	Street address, if available, o		Single Duple Condo	he property? Check all that ap e-family home ex or multi-unit building ominium or cooperative factured or mobile home	ply.	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	
	Number Street City State	Zip Code	Land	ment property share		Describe the nature of interest (such as fee si the entireties, or a life of the contraction)	mple, tenancy by
		,	one. Debto Debto Debto At leas	an interest in the property? or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and another commation you wish to add ab	ır	Check if this is cor (see instructions)	mmunity property

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Debtor 1	Steve First Name	R Middle Name	McAlister Last Name	Case number	(if known)	
1.3 Stre	et address, if available, or oth		hat is the property? Check all that appl Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	y.	Do not deduct secured cl the amount of any secure Creditors Who Have Cla Current value of the entire property?	·
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee sit the entireties, or a life of	mple, tenancy by
			ho has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another her information you wish to add abou		Check if this is cor (see instructions)	nmunity property
		pro ion you own for all	operty identification number: of your entries from Part 1, including	g any entries	s for pages	
Do you ov you own th	at someone else drives. If you ns, trucks, tractors, sport utilit	quitable interest in lease a vehicle, also	any vehicles, whether they are register report it on Schedule G: Executory Controles			
3.1	Make Model: Year: Approximate mileage: Other information:	Dodge Charger 2008 105000	Who has an interest in the property one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	y? Check	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	•
			At least one of the debtors and ano Check if this is community propinstructions)		\$7850.00	\$7850.00
3.2	Make Model: Year: Approximate mileage:		Who has an interest in the property one. Debtor 1 only	y? Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	•
	Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community propinstructions)		Current value of the entire property?	Current value of the portion you own?

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Debtor 1	Steve First Name	R Middle Name	McAlister Last Name	Case number	(if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions)	d another	the amount of any se	ed claims or exemptions. Put cured claims on <i>Schedule D:</i> care Claims Secured by Property. Current value of the portion you own?
		es, ATVs and other r	Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions) ecreational vehicles, other vehicling vessels, snowmobiles, motors	d another property (see icles, and acces	the amount of any se Creditors Who Have Current value of th entire property? sories	ed claims or exemptions. Put cured claims on Schedule D: e Claims Secured by Property. The Current value of the portion you own?
4.1	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions)	d another	the amount of any se	ed claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
4.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions)	d another	the amount of any se	ed claims or exemptions. Put cured claims on Schedule D: e Claims Secured by Property. The Current value of the portion you own?
	•	•	f your entries from Part 2, inclu	• •		\$7850.00

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D	ebtor 1	Steve	R	McAliste	Case nu	ımber (if known)				
		First Name	Middle N							
			Your Personal and H	itable interest in any	of the following item	ıs?	Current value of the portion you own? Do not deduct secured claims or exemptions.			
			Is and furnishings opliances, furniture, linens, ch	nina, kitchenware						
✓	Yes. D	escribe	Misc. Household goods &	Furnishings			\$150.00			
	7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music No									
✓	Yes. D	escribe	Misc. Electronics				\$150.00			
	Examp	•	and figurines; paintings, pri	nts, or other artwork; books, pions; other collections, memo						
H		escribe								
	Examp	les: Sports, p	ports and hobbies bhotographic, exercise, and caks; carpentry tools; musical	other hobby equipment; bicycle instruments	es, pool tables, golf clubs, sk	sis; canoes				
넏										
Ш	Yes. L	escribe								
	No		ifles, shotguns, ammunition,	and related equipment						
	1. Clot Examp		y clothes, furs, leather coats,	designer wear, shoes, access	sories					
	No									
✓	Yes. D	escribe	Misc. Clothing				\$150.00			
	2. Jewe Examp	•		gagement rings, wedding ring	gs, heirloom jewelry, watches	s, gems,				
✓	Yes. D	escribe	Misc. Jewelry				\$100.00			
	Examp No	-farm anima les: Dogs, ca Describe	als ats, birds, horses				 			
1	4. Any	other perso	onal and household items	you did not already list, inc	luding any health aids vou	u did not list				
	No	• -		,	<u> </u>					
		escribe								
				from Part 3, including any		e attached	\$550.00			

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Debt	or 1	Steve	R	McAlister	Case number (if known)	
		First Name	Middle Name	Last Name		
Part	4:	Describe Your F	Financial Assets			
Do	you	own or have a	ny legal or equitable inte	erest in any of the fo	ollowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash					
Е	xamp		e in your wallet, in your home, in a s	afe deposit box, and on han	d when you file your petition	
	님	No				# 00.00
	✓	Yes			Cash:	\$30.00
17.	Exa		vings, or other financial accounts; titutions. If you have multiple acco		es in credit unions, brokerage houses, n, list each.	
		No				
	✓	Yes		Institution name:		
			47.4 Chapling appoint			
			17.1. Checking account:			
			17.2. Checking account:			
			17.3. Savings account:			
			17.4. Savings account:			<u> </u>
			17.5. Certificates of deposit:			
			17.6. Other financial account:	Rush		\$7.00
			17.7. Other financial account:			
			17.8. Other financial account:			
			17.9. Other financial account:			
18.			or publicly traded stocks			
	Exa		nvestment accounts with brokerage	tirms, money market accou	Ints	
		No Yes	Institution or issuer name:			
	ш	103				
19.	Non	n-publicly traded st	ock and interests in incorporat	ed and unincorporated b	ousinesses, including an interest in	_
	an L	LC, partnership, a		•	, •	
		No	Name of entity		% of ownership:	
	Ш	Yes. Give specific information about	. tallio or oracy		70 of officions.	
		them				

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Deb	tor 1	Steve	R	McAlister	Case number (if known)	
		First Name	Middle Name	Last Name		
20.			orate bonds and other negoti- nclude personal checks, cashiers			
			nts are those you cannot transfer			
		No	,			
	Ħ					
	Ш	Yes. Give specific information about	Issuer name:			
		them				
						-
						-
21.		tirement or pension) thrift savings accounts or	other pension or profit-sharing plans	
		No	, i, 21110, i, 1100gii, 101(ii), 100(0), trint davings addounts, or	care periodical profit charing plane	
	Ħ	Yes. List each	Type of account:	Institution name:		
		account	401(k) or similar plan:			
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	Sec	curity deposits and p	prepayments	_		
	You	r share of all unused o	leposits you have made so that yo	ou may continue service or u	se from a company	
			vith landlords, prepaid rent, publi	c utilities (electric, gas, water	er), telecommunications	
	_	npanies, or others		Institution name:		
		No		msuluion name.		
	Ш	Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.	Anı	nuities (A contract for	a periodic payment of money to	you, either for life or for a nu	mber of years)	
	✓	No				
		Yes	Issuer name and description:			

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Debte	or 1 Steve First Name	R Middle 1	Name	McAlister Last Name	Case number (if known)	
24.	Interests in an		ount in a qual		der a qualified state tuition program	
	✓ No Yes	Institution name and descript	ion. Separately	file the records of any interes	sts.11 U.S.C. § 521(c):	
	-					
25.	Trusts, equita exercisable fo		roperty (othe	r than anything listed in lir	ne 1), and rights or powers	
	✓ No Yes. Descr	ibe				
26.		rights, trademarks, trade s		ther intellectual property n royalties and licensing agre	ements	_
	✓ No Yes. Descr	ibe				
27.		chises, and other general		e association holdings, liquo	r licenses, professional licenses	1
	✓ No Yes. Descr					7
Mon	ey or prope	rty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or prope Tax refunds ow					portion you own? Do not deduct secured
						portion you own? Do not deduct secured
	Tax refunds ow No Yes. Give s	ved to you pecific information			Federal:	portion you own? Do not deduct secured
	Tax refunds ow ✓ No ☐ Yes. Give s about you al	ved to you pecific information them, including whether ready filed the returns			Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ow ✓ No ✓ Yes. Give s about you al and th	pecific information them, including whether ready filed the returns te tax years				portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ow No Yes. Give s about you al and th Family support Examples: Past	pecific information them, including whether ready filed the returns to tax years	pusal support, c	child support, maintenance, d	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ow No Yes. Give so about you al and th Family support Examples: Past	pecific information them, including whether ready filed the returns te tax years	ousal support, o	child support, maintenance, d	State: Local: ivorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give so about you al and th Family support Examples: Past	pecific information them, including whether ready filed the returns to tax years	ousal support, o	child support, maintenance, d	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ow No Yes. Give so about you al and th Family support Examples: Past	pecific information them, including whether ready filed the returns te tax years	ousal support, o	child support, maintenance, d	State: Local: ivorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give so about you al and th Family support Examples: Past	pecific information them, including whether ready filed the returns te tax years	ousal support, o	child support, maintenance, d	State: Local: ivorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give so about you al and th Family support Examples: Past	pecific information them, including whether ready filed the returns te tax years	ousal support, o	child support, maintenance, d	State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds ow ✓ No ☐ Yes. Give s about you al and the Family support Examples: Past of ✓ No ☐ Yes. Give s ✓ Other amounts	pecific information them, including whether ready filed the returns te tax years t due or lump sum alimony, specific information			State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds ow ✓ No ☐ Yes. Give s about you al and the Family support Examples: Past of ✓ No ☐ Yes. Give s ✓ Other amounts Examples: Unpage	pecific information them, including whether ready filed the returns te tax years t due or lump sum alimony, specific information	e payments, dis	sability benefits, sick pay, vac	State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds ow ✓ No ☐ Yes. Give s about you al and the Family support Examples: Past of ✓ No ☐ Yes. Give s ✓ Other amounts Examples: Unpage	pecific information them, including whether ready filed the returns the tax years the due or lump sum alimony, specific information	e payments, dis	sability benefits, sick pay, vac	State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds ow ✓ No ☐ Yes. Give so about you all and the samples: Past of the solution of the samples	pecific information them, including whether ready filed the returns the tax years	e payments, dis	sability benefits, sick pay, vac	State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1	Steve	R	McAlister	Case number (if known)	
		First Name	Middle Name	Last Name		
31.		erests in insurance pamples: Health, disabi		Ith savings account (HSA); credit, ho	omeowner's, or renter's insurance	
		No Yes. Name the insure of each policy and lis		Company name:	Beneficiary:	Surrender or refund value:
32.	If y		of a living trust, expect pr	someone who has died roceeds from a life insurance policy, o	or are currently entitled to receive	
33.				ou have filed a lawsuit or made a ance claims, or rights to sue	demand for payment	
	✓	No Yes. Describe				
34.		her contingent and of set off claims	unliquidated claims of	every nature, including counterc	laims of the debtor and rights	
		No Yes. Describe				
35.	An	y financial assets yo	u did not already list			
		No Yes. Describe				
36.				n Part 4, including any entries for		\$37.00
Part	: 5:	Describe Any B	usiness-Related P	roperty You Own or Have a	n Interest In. List any real estat	e in Part 1.
37.	Do			erest in any business-related prop		
	✓	No. Go to Part 6. Yes. Go to line 38.	, ,	, , , , , , , , , , , , , , , , , , , ,	·	Current value of the portion you own? Do not deduct secured claims or exemptions
38.			commissions you alrea	ady earned		
		Yes. Describe				
39.	Ex	amples: Business-rela	ishings, and supplies ted computers, software,	modems, printers, copiers, fax mach	nines, rugs, telephones, desks, chairs, elect	ronic devices
		No Yes. Describe				

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Deb		Steve First Name	R Middle Neme	McAlister Lost Name	Case number (if known)	
40.		First Name hinery, fixtures, ec	Middle Name	Last Name use in business, and tools of yo	ur trade	
٠٠٠.	_	-	tarbinoni, subbiles you	200 240111000, and 10010 01 yo		
		No Yes. Describe				
	Ш	100. DOSUING				
41.	_	ntory				
		No				
	П,	Yes. Describe				
	_					
42.			ips or joint ventures			
	✓ I	No		Name of antity	0/ of our orobin.	
		Yes. Give specific		Name of entity:	% of ownership:	
		information about them				
	,	u ioi i				
43. (Custo	mer lists, mailing	lists, or other compilati	ons		
	✓ I	No				
	一一	Yes. Do your lists in	nclude personally identifiab	le information (as defined in 11 U.S	S.C. § 101(41A))?	
		☐ No				
		Yes. Desc	ribe			
		_				
44.	Any	business-related	property you did not alre	ady list		
		No				
		Yes. Give specific information				
	'	iniomation				
				-		
						_
				art 5, including any entries for p		
ior P						
Part			Farm- and Commeron interest in farmland, list it		erty You Own or Have an Interest	In.
46.				erest in any farm- or commercia	I fishing-related property?	
40.			iny iegai oi equitable IIII	Greek in any farin' Of Commercia	i naming-related property :	Current value of the
		No. Go to Part 7.				portion you own?
	Ш	Yes. Go to line 47.				Do not deduct secured claims
						or exemptions
47.		m animals	withing forms and and Calif			
	⊏xar	ripies: Livestock, po	oultry, farm-raised fish			
		No				
		Yes. Describe				
	_					

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Debt	or 1	Steve	R Middle Nesse	McAlister	Case number (if known)	
10	Cro	First Name ps-either growing	Middle Name	Last Name		
48.			oi naivesteu			
		No Van Dansviha				
	Ш	Yes. Describe				
	-				-	
49.	Far	m and fishing equip	oment, implements, machinery, f	ixtures, and tools of trade	e	
	✓	No				
		Yes. Describe				
		L				
50.	Far	m and fishing supp	lies, chemicals, and feed			
	V	No				
		Yes. Describe				
51.	Αn	/ farm- and commer	cial fishing-related property you	did not already list		
	√	No		,		
	H	Yes. Describe				
	ш	Too. Boombo				
	-				Г	_
			of your entries from Part 6, incl			
for Pa	art 6.	. Write that number	here			
Part			operty You Own or Have a		I DIG NOT LIST ABOVE	
			perty of any kind you did not alre s, country club membership	auy list?		
	✓	No				ı
	П	Yes. Give specific				
		information				
54. Ac	dd th	ne dollar value of all	of your entries from Part 7. Writ	e that number here	>	
Part 8	8:	List the Totals	of Each Part of this Form			
55. P	art 1	1: Total real estate. I	ine 2		>	
00.1	u	rotarroarootato, i				
56. p	art 2	2 total vehicles, line	5	\$7850.00		
57. P a	art 3	: Total personal and	d household items, line 15	\$550.00		
58. P a	art 4	: Total financial ass	ets, line 36	\$37.00	_	
59. P	art !	5: Total business-re	lated property, line 45	φ51.00		
			shing-related property, line 52		_	
				-	<u> </u>	
61. P	art 7	7: Total other prope	rty not listed, line 54			
62. T	otal	personal property.	Add lines 56 through 61	\$8437.00		+ \$8437.00
					Copy personal property total	
						\$8437.00
	otal	of all property on Se	chedule A/B. Add line 55 + line 62.			

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Fill in this information to identify your case:							
Debtor 1	Steve	R	McAlister				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if fil	ing) First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number	·		(State)				

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt				
2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description: Misc. Clothing Line from Schedule A/B: 11	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)		
	Brief description: Misc. Electronics Line from Schedule A/B: 07	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covered No Yes	3 years after that for ca				

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Debtor 1 Steve McAlister Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$150.00 **V** description: \$150.00 Misc. Household goods 100% of fair market value, up to any & Furnishings applicable statutory limit Line from Schedule A/B: 06 Brief 735 ILCS 5/12-1001(b) \$30.00 **V** description: \$30.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1001(b) \$100.00 **✓** description: \$100.00 Misc. Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 735 ILCS 5/12-1001(b) \$7.00 **V** description: \$7.00 Rush 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 17

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			· ·			
Fill in this in	formation to identify your case	e:				
Debtor 1	Steve	R	McAlister			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if t	filing) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	Northern	District of Illinois			
Cooo numb	•		(State)			
Case numb (If known)	eı					
Officia	I Form 106D			l		Check if this is a amended filing
Sched	dule D: Credit	ors Who Ha	ve Claims Secur	ed by Pro	pertv	12/1
Part 1: List a for ea	es. Fill in all of the information ist All Secured Claims all secured claims. If a credito	his form to the court with you below. Or has more than one seculeditor has a particular claim	red claim, list the creditor separately I, list the other creditors in Part 2. As ng to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports	Column C Unsecured portion If any
				variable of conatoral.	this claim	ii diriy
	or Finance tor's Name	Describe the property	that secures the claim:	\$9,077.00	\$7,850.00	\$1,227.00
	Box 1817	Automobile				
Nu	umber Street		the claim is: Check all that apply.			
		Contingent				
Evan City	State ZIP Code	Unliquidated Disputed				
	owes the debt? Check one.	Nature of lien. Check a	Ill that apply			
	Debtor 1 only		made (such as mortgage or secured			
	Debtor 2 only Debtor 1 and Debtor 2 only	car loan)	nade (such as mortgage of secured			
	At least one of the debtors and	Statutory lien (such	as tax lien, mechanic's lien)			
a	another	Judgment lien from	a lawsuit			
	Check if this claim relates o a community debt	Other (including a ri	ght to offset)			
	debt was 9/1/2016	Last 4 digits of accou	nt number3601			
	Add the dollar value of	your entries in Column	A on this page. Write that	\$9,077.00		

number here:

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Fill	in this inform	ation to identify your cas	e:					
Deb	otor 1	Steve	R	McAlister				
		First Name	Middle Name	Last Name	-			
	otor 2		A C I II A I		_			
(Sp	ouse, it tiling	First Name	Middle Name	Last Name				
Unit	ted States Ba	ankruptcy Court for the:	Northern	District of Illinois	_			
Car	se number			(State)				
	nown)				-			
Of	ficial F	orm 106E/F				Ch	eck if this is ar	n amended filing
			ditara Wha	Hayra I Indonum	ad Claima			
<u> </u>	neau	ile E/F: Cre	editors vyno	Have Unsecur	ed Claims			12/15
106Å that entri knov	VB) and on are listed in es in the bound.	Schedule G: Executor a Schedule D: Creditor exes on the left. Attach	y Ċontracts and Unexpire s Who Hold Claims Secu	result in a claim. Also list exected Leases (Official Form 106G). red by Property. If more space of this page. On the top of any a	Do not include any cre is needed, copy the Pa	editors with art you nee	n partially sec ed, fill it out, n	cured claims number the
1.			secured claims against y					
٠.		o to Part 2.	iscource oldinis against y	ou.				
	Yes.							
2.							mounts. As	
						Total claim	Priority amount	Nonpriority amount

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Debto		McAlister Case number (if known)							
		Last Name							
Part 2	art 2: List All of Your NONPRIORITY Unsecured Claims								
3.									
	No. You have nothing to report in this part. Submit this form to	the court with your other schedules.							
1	Yes.								
4. I	List all of your nonpriority unsecured claims in the alphabeti	ist all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority							
		ach claim listed, identify what type of claim it is. Do not list claims already included in Part 1.							
	If more than one creditor holds a particular claim, list the other cred Page of Part 2.	editors in Part 3.lf you have more than four priority unsecured claims fill out the Continuation							
	rage on arcz.	Total claim							
4.1	Aberdeen Apartments	Φ4 000 00							
4.1	Nonpriority Creditor's Name	Last 4 digits of account number							
	8680 WALNUT GROVE BEND Number Street	When was the debt incurred?n/a							
	Number Street	As of the date you file, the claim is: Check all that apply.							
		Contingent							
	Camby Indiana 46113	Unliquidated							
	City State Zip Code	Disputed							
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:							
		Student loans							
	Debtor 2 only	Obligations arising out of a separation agreement or divorce							
	Debtor 1 and Debtor 2 only	that you did not report as priority claims							
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar							
	Check if this claim relates to a community debt	debts Other. Specify Bank Rent Owed							
	Is the claim subject to offset?	Other. Specify Bank Rent Owed							
	✓ No								
	Yes								
4.2	AD ASTRA RECOVERY SERV Nonpriority Creditor's Name	Last 4 digits of account number 5774 \$348.00							
	7330 W 33RD ST N STE 118	When was the debt incurred? 1/1/2015							
	Number Street	As of the date you file, the claim is: Check all that apply.							
	-	Contingent							
	WICHITA Kansas 67205	Unliquidated							
	City State Zip Code Who incurred the debt? Check one.	Disputed							
	✓ Debtor 1 only								
	Debtor 2 only	Type of NONPRIORITY unsecured claim:							
	Debtor 1 and Debtor 2 only	Student loans							
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar							
	Is the claim subject to offset?	debts							
	✓ No	001 Collection; Collecting for ORIGINAL CREDITOR: SPEEDY							
	Yes	Other. Specify CASH 123							
4.3	ARS	— Last 4 digits of account number 6463 \$1,055.00							
	Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200	Last 4 digits of account number							
	Number Street	When was the debt incurred? 7/1/2014							
		As of the date you file, the claim is: Check all that apply.							
	FORT Florida 33313	Contingent							
	LAUDERDAL State Tin Code	Unliquidated							
	City State Zip Code Who incurred the debt? Check one.	Disputed							
	Debtor 1 only	Type of NONPRIORITY unsecured claim:							
	Debtor 2 only	Student loans							
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce							
	At least one of the debtors and another	that you did not report as priority claims							
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts							
	Is the claim subject to offset?	Collection; Collecting for							
	✓ No	ORIGINAL CREDITOR: Other. Specify MEDICAL							
	Yes	. ,							

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ARS \$747.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200 When was the debt incurred? 11/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent **FORT** Florida 33313 Unliquidated LAUDERDAL State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt **✓** Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: **✓** No Other. Specify **MEDICAL** Yes 4.5 ARS \$501.00 Last 4 digits of account number 9922 Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent **FORT** 33313 Florida Unliquidated LAUDERDAL State City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt $\overline{}$ Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: **V** No Other. Specify Yes 4.6 Comcast \$1,000.00 Last 4 digits of account number _ Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated Washington Seattle 98168 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Cable Bill Is the claim subject to offset? **✓** No

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Commonwealth Edison \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name 3 Lincoln Ctr Fl 4 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60181 Oakbrook Ter Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Electric Bill Is the claim subject to offset? **✓** No Yes Community Hospital - Munster \$4,000.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3602 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Indiana 46321 Munster City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Hospital Bill Is the claim subject to offset? **✓** No Yes **CONVERGENT OUTSOURCING** \$508.00 Last 4 digits of account number 6984 Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? 6/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent Renton Washington 98057 Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: **V ✓** No

Yes

Other. Specify

COMCAST

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Direct T.V \$200.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 5007 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Satellite Bill Is the claim subject to offset? **V** No Yes 4.11 ENHANCED RECOVERY CO L \$795.00 Last 4 digits of account number 6872 Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 9/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar Is the claim subject to offset? 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: DISH **✓** No Yes 4.12 Franciscan St. Margaret Health - Hammond \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name 5454 Hohman Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Indiana 46320 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Medical Bill Is the claim subject to offset? **✓** No

☐ Yes

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 \$2,500.00 Last 4 digits of account number Nonpriority Creditor's Name 241 Ogden Street When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Indiana 46320 Hammond City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Back Rent Owed Is the claim subject to offset? **✓** No Yes 4.14 Illinois Tollway \$8,000.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated Downers Grove Illinois 60515 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify **Tollway Violations** Is the claim subject to offset? **✓** No ☐ Yes 4.15 Ingalls Memorial Hospital \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 3397 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60654-0397 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify___ Medical Bill Is the claim subject to offset? **✓** No

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 JD Byrider \$13,000.00 Last 4 digits of account number Nonpriority Creditor's Name 6539 Ogden Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60402 Illinois Berwyn City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 2003 Buick Century Never Is the claim subject to offset? Other. Specify Surrendered **✓** No Yes 4.17 Johnson, Gregory \$1,450.00 Last 4 digits of account number Nonpriority Creditor's Name 21720 Olivia When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Heights Illinois 60411 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Case #2012-M6-003012 Is the claim subject to offset? **✓** No Yes 4.18 Midwest Title Loans \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name 3440 Preston Ridge Rd. Suite 500 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Alpharetta Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 1997 Pontiac Grand Prix Is the claim subject to offset? **✓** No

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** NATIONAL CREDIT MGMT 4.19 \$1,073.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 32900 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent SAINT LOUIS City 63132 Montana Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: IVY Other. Specify TECH COMMUNITY COLLEGE Yes 4.20 Nicor Gas \$500.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 5407 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60197 Carol Stream City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Gas Bill ✓ Other. Specify ____ Is the claim subject to offset? **✓** No Yes 4.21 QC Lenders \$800.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5598 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Elgin Illinois 60121 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Payday Loan Is the claim subject to offset? **✓** No

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 Region Renovations, Inc. \$3,024.00 Last 4 digits of account number _ Nonpriority Creditor's Name 926 E. 150th Street When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Indiana 46327 Hammond City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Back Rent Due--Case Is the claim subject to offset? Other. Specify #45D12-1304-SC-00395 **✓** No Yes 4.23 Sprint \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 219554 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Missouri 64121 Kansas City City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Cell Phone Bill Is the claim subject to offset? **✓** No Yes 4.24 **US Cellular** \$400.00 Last 4 digits of account number _ Nonpriority Creditor's Name Dept 0205 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Palatine Illinois 60055 City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify ___ Cell Phone Bill Is the claim subject to offset? **✓** No

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McAlister Debtor 1 Steve Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 **USA LOANS** \$300.00 Last 4 digits of account number _ Nonpriority Creditor's Name 428 E. 162nd Street When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60473 South Holland Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Payday Loan Is the claim subject to offset? **✓** No Yes 4.26 **VERIZON** \$1,571.00 Last 4 digits of account number 2310 Nonpriority Creditor's Name NATIONAL RECOVERY P.O. BOX 26055 When was the debt incurred? 7/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **MINNEAPOLIS** Minnesota 55426 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar Is the claim subject to offset? ✓ Other. Specify _ InstallmentLoan **✓** No Yes 4.27 WOW \$2,300.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 4350 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Cable Bill Is the claim subject to offset? **✓** No

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McAlister Debtor 1 Steve Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$58,072.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$58,072.00 6j. Total. Add lines 6f through 6i. 6j.

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Debtor 1	Steve	R	McAlister
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fil	ing) First Name	Middle Name	Last Name
United States	s Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case numbe	r		
(If known)			

Schedule G: Executory Contracts and Unexpired Leases

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	formation to identify your ca	se:			
Debtor 1	Steve	R	McAlister		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if f	iling) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)	er				
					eck if this is an
					ended filing
Officia	I Form 106H				
Sched	ule H: Your C	odebtors			12/15
✓ No	o es	you are filing a joint case, do	·	s a codebtor.) ? (Community property states and territories include Arizona, C	California,
		xico, Puerto Rico, Texas, Wa	ashington, and Wisconsin.	ı.)	
	o. Go to line 3.	spouse, or legal equivalent li	vo with you at the time?		
	s. Dia your spouse, rormer : No	spouse, or legal equivalent i	ve with you at the time?		
		state or territory did you live	?	Fill in the name and current address of that person.	
	Name of your spouse,	former spouse, or legal equi	valent	·	
	Number Street				
	City	State	Zip C	Code	
	•	•	•	or if your spouse is filing with you. List the person shown	

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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				3.5	<u> </u>		
Fill in this	information to identif	y your case:					
Debtor 1	Steve	R	McAliste	er			
	First Name	Middle Name	Last Nan	ne	_	01 1 1 1 1 1 1	
Debtor 2					_	Check if this is:	
(Spouse, if fil	ling) First Name	Middle Name	Last Nan	ne		An amended filing	
United States	s Bankruptcy Court for the:	Northern	District of Illino	ois	_	A supplement showing expenses as of the follo	
Case number	r		(Sta	ite)		expenses as of the folio	wing date.
(If known)						MM / DD / YYYY	
Official	Form 106I						
Schedi	ule I: Your Inc	come					12/15
	pages, write your na	ame and case number		Answer eve	ery question		
	ill in your employment		Debtor 1			Debtor 2	
ır	nformation.	Employment status	✓ Employed	d		Employed	
	you have more than one ob,		Not Empl			Not Employed	
	ttach a separate page with	_	_				
	nformation about additional	Occupation	Machine Ope	erater		_	
	mployers.	Employer's name	Wheatland Tube, LLC 4435 S Western Blvd			_	
In O	nclude part time, seasonal,	Employer's address				_	
	elf-employed work.		Number Street			Number Street	
0	Occupation may include						
	tudent r homemaker, if it applies.					_	
0.	. пототнатот, и и аррисот		Chicago City	Illinois State	Zip Code	City St	ate Zip Code
			3 months	Olalo	Zip Code		
		How long employed there?	3111011113				
Part 2: 0	Give Details About	Monthly Income					
you are sepa	•	date you file this form. If yo	u have nothing to	o report for any	line, write \$0 in	the space. Include your non	-filing spouse unless
	ur non-filing spouse have mo parate sheet to this form.	ore than one employer, combin	ne the information	n for all employe	ers for that perso	on on the lines below. If you r	need more space,
allaon a 3 0 1	Sarato Grioti to trilo IOIII.			For D	ebtor 1	For Debtor 2 or non-filing spouse	
		ry, and commissions (before alculate what the monthly wage		2.	\$4,235.83		-
3. Estima	ate and list monthly over	time pay.	3	S.	+ \$0.00		

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1	Steve First Name	R Middle Name	McAlister Last Name		Case number	(if known)		
	T HOC HAINS	made Name	Lactivamo		For Debtor 1	For Debtor 2 or non-filing spouse		
Сору	line 4 here		→ 4.	_	\$4,235.83		-	
5. List a	ll payroll dedu							
5a. T	ax, Medicare,	and Social Security deductions	5a.	_	\$691.17			
5b. N	landatory con	tributions for retirement plans	5b.		\$0.00			
5c. V	oluntary cont	ributions for retirement plans	5c.	_	\$0.00			
5d. R	equired repay	ments of retirement fund loans	5d.	_	\$0.00			
5e. Ir	surance		5e.	_	\$0.00			
5f. D e	omestic supp	ort obligations	5f.	_	\$0.00			
	Jnion dues		5g.	_	\$15.17			
•		ons. Specify:	•	_	\$0.00			
		luctions. Add lines 5a + 5b + 5c + 5d + 5e +5		_	\$706.33			
7. Calcu	late total mon	hthly take-home pay. Subtract line 6 from line	4. 7.	_	\$3,529.50			
8. List a	II other incom	e regularly received:						
b A re	usiness, profettach a stateme	m rental property and from operating a ession, or farm ent for each property and business showing gray and necessary business expenses, and the to	otal		\$0.00			
	nterest and di		8a. 8b.	_	\$0.00			
8c. F d Ir	amily support ependent regu clude alimony,	payments that you, a non-filing spouse, o		<u>-</u>	\$0.00			
8d. U	nemploymen	t compensation	8d.	_	\$0.00			
8e. S	ocial Security		8e.	_	\$0.00			
Indias the su	clude cash assi	ent assistance that you regularly receive stance and the value (if known) of any non-cas ou receive, such as food stamps (benefits unde al Nutrition Assistance Program) or housing			\$0.00			
		rement income	6i. 8g.	_	\$0.00			
ŭ		income. Specify:	8h.	_	\$0.00	+		
	-	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g -		· 📑	\$0.00	` <u> </u>	1	
g. Add a	iii otilei iiicoii	10 Add lines 04 + 05 + 06 + 04 + 06 + 01 + 09 -	+ OH. 9.	느	ψ0.00		<u>]</u>	
		income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing s	10. pouse	_	\$3,529.50	+	=	\$3,529.50
Includ relati	de contributions ves.	ular contributions to the expenses that your last of the expenses that your last of the expenses of of the	household, your	deper	.,	,		
_		mounts already included in lines 2-10 or amou	ints that are not a	avallar	nie to pay expenses iis	ted in S <i>chedule J</i> .	44 .	#0.00
Spec	пу:						11. +	\$0.00
		n the last column of line 10 to the amount of the Summary of Schedules and Statistical Su					12.	\$3,529.50
				_				Combined monthly income
	•	increase or decrease within the year after y	ou file this for	n?				
✓	No.							
	Yes. Explain:							

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Fill in this inform	nation to identify your	caco:			
FIII III UIIS IIIIOIII	lation to identity your	Case.			
Debtor 1	Steve First Name	R Middle Name	McAlister Last Name		
Debtor 2	i iist Name	Middle Name	Lastivaine	Check if this is:	
(Spouse, if filing	First Name	Middle Name	Last Name	An amended filin	n
United States B	ankruptcy Court for th	e: Northern	District of Illinois	_	owing post-petition chapter 13
	. ,		(State)		ne following date:
Case number (If known)					
000				MM / DD / YYY	(
Official I	Form 106J				
Schedul	e J: Your E	Expenses			12/1
information. If r			e filing together, both are equally r form. On the top of any additional		
Part 1: Desc	ribe Your House	ehold			
1. Is this a join	t case?				
✓ No. Go	to line 2				
Yes. Do	es Debtor 2 live in a	a separate household?			
Г	No				
	Yes. Debtor 2 mus	t file Official Forms 106J-2. Expens	ses for Separate Household of Debto	r2.	
2. Do you have		No			
dependents?		1			
Do not list De Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to	Dependent's	Does dependent live
Debiol 2.		each dependent	Debtor 1 or Debtor 2 Child	age 5 years	with you?
			Office	<u>o youro</u>	✓ Yes.
			Child	4 years	No.
					✓ Yes.
	enses include	No			
than	f people other				
yourself and dependents	-	Yes			
dependents) <u> </u>				
Part 2: Estin	nate Your Ongoi	ng Monthly Expenses			
	of a date after the ba		ou are using this form as a suppl plemental Schedule J, check the		
	•	n-cash government assistance ed it on Schedule I: Your Income	•		Your expenses
	or home ownership r the ground or lot. 4.	expenses for your residence. Ind	clude first mortgage payments and		\$1,250.00
If not inclu	uded in line 4:				
4a. Real es	state taxes				4a \$0.00
4b. Propert	y, homeowner's, or re	nter's insurance			4b. \$0.00
4c. Home r	naintenance, repair, ar	nd upkeep expenses			4c. \$0.00
4d. Homeo	wner's association or	condominium dues			4d. \$0.00

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Debtor 1

Steve

McAlister Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$250.00 6a. 6b. Water, sewer, garbage collection \$80.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$160.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$600.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$150.00 10. Personal care products and services 10. \$150.00 11. Medical and dental expenses \$50.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$350.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$118.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$356.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Steve	R	McAlister	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calcu	ılate your monthly e	expenses.				\$3,514.00
22a. A	Add lines 4 through 2	1.				\$0.00
	· ·	expenses for Debtor 2), if any, fro	m Official Form 106J-2			\$3,514.00
	add line 22a and 22b.	22.	φ3,314.00			
	late your monthly r	, , ,			22.	
	•		o dulo I			
	13	mbined monthly income) from Sch	ledule I.		23a	\$3,529.50
23b. C	Copy your monthly exp	penses from line 22 above.			23b	\$3,514.00
23c. S	Subtract your monthly	expenses from your monthly incor	me.			\$15.50
	The result is your mo	nthly net income.			23c	
24 Do v	ou evnect an increa	se or decrease in your expens	es within the year after yo	u file this form?		
24. DO y	ой ехрестан пістеа	se of decrease in your expense	es within the year after yo	u ille tills form:		
		ect to finish paying for your car loar rease or decrease because of a m	,			
1	No					
	⁄es					
	Explain here	e:				

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Fill in this information to identify your case:								
Debtor 1	Steve	R	McAlister					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if fili	^{ng)} First Name	Middle Name	Last Name					
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)					
Case number (If known)			(State)					

Official Form 106Dec

Check if this is an
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	☑ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and
	·	4.0
X	7-d Grove into more	*
	Signature of Debtor 1	Signature of Debtor 2
	Date 11/18/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

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Debtor 1	Steve	R	McAlister
Debtor 2	First Name	Middle Name	Last Name
(Spouse, if filing) First Name		Middle Name	Last Name
Inited States	Bankruptcy Court for the:	Northern	District of Illinois (State)
Case number If known)			(Otato)

Check if this is an amended filing

for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Part	Part 1: Give Details About Your Marital Status and Where You Lived Before									
1.	Wh	What is your current marital status?								
	✓	Married Not married								
2.	Dui	ring the last 3 ye	ars, have yo	ou lived anywhere	other than where you live	now?				
	✓	No Yes. List all of th	e places you	lived in the last 3 ye	ears. Do not include where yo	ou live now.				
		Debtor 1:			Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there	
						Same as	Debtor 1		Same as Debtor 1	
		Number Street			From	Number Street			From	
					To				То	
		City	State	Zip Code		City	State	Zip Code		
						Same as	Debtor 1		Same as Debtor 1	
		Number Street			From	Number Stree	t		From	
					To				To	
		City	State	Zip Code		City	State	Zip Code		
	territo	ories include Ariza No	ona, California	a, Idaho, Louisiana,	ouse or legal equivalent in Nevada, New Mexico, Puer btors (Official Form 106H).				mmunity property states and	

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Deb	tor 1	Steve R First Name Middle	e Name	McAlister Last Name	Case n	umber (if known)	
Part	2:	Explain the Sources of Your					
	Did Fill in	you have any income from employn in the total amount of income you receivities. If you are filing a joint case and you No Yes. Fill in the details.	nent or from operatir ed from all jobs and al	l businesse	es, including part-time		ars?
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business		\$20955.00	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	-	\$13206.00	Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2014) YYYY	Wages, commissions, bonuses, tips Operating a business	<u>-</u>	\$10364.00	Wages, commissions, bonuses, tips Operating a business	
! !	Includoene case List e	you receive any other income during de income regardless of whether that in fit payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details.	come is taxable. Exam nterest; dividends; moi together, list it only on	nples of oth ney collecte ce under D	ner income are alimony; ched from lawsuits; royalties; ebtor 1.	; and gambling and lottery winni	
			Debtor 1			Debtor 2	
			Sources of incon Describe below.	ne	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:					
		for last calendar year: January 1 to December 31, 2015) YYYY	-				
		For the calendar year before that: January 1 to December 31, 2014) YYYYY	Est. LINK - Est. Unemploym Comp	nent	\$2,220.00 \$2,340.00		

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Debtor		Steve First Name		R Middle Name	McAlister Last Name	Case numbe	r (if known)	
Part 3:			Payments Yo	ou Made Be	efore You Filed for	Bankruptcy		
			•					
6. Are				•	ily consumer debts?			
	N		btor 1 nor Debto a personal, famil			Consumer debts are defined in	11 U.S.C. § 101(8) as "incu	rred by an individual
		During the 9	00 days before yo	u filed for bank	kruptcy, did you pay any cr	editor a total of \$6,425* or more	e?	
		No. Go	to line 7.					
	Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
		* Subject to	adjustment on 4/0	01/19 and eve	ry 3 years after that for cas	ses filed on or after the date of	adjustment.	
✓	Ye	es. Debtor 1 o	r Debtor 2 or bo	th have prim	narily consumer debts.			
		During the 9	00 days before yo	u filed for bank	kruptcy, did you pay any cr	editor a total of \$600 or more?		
		✓ No. Go	to line 7.					
	Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	C	reditor's Name	;					Mortgage
	N	lumber Street						Car Credit card
								Loan repayment Suppliers or
	C	City	State Zi _l	p Code				vendors Other
	C	reditor's Name)					Mortgage
	N	lumber Street						Car Credit card
	_							Loan repayment
	<u>-</u>	City	State Zi	p Code				Suppliers or vendors
								Other
	C	reditor's Name)					Mortgage
	<u> </u>	lumber Street						Car Credit card
	_							Loan repayment
	(City	State Zi	p Code				Suppliers or vendors
	•	•		, , , , , ,				Other

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Debto	or 1	Steve First Name		R Middle Name		lister Name	Case number (if	known)
 (8	nsid corp ager	ers include your re orations of which y	latives; any geno ou are an officer a business you	eral partners; , director, per	relatives of any gorson in control, or o	eneral partners; par owner of 20% or mo	ore of their voting sec	o was an insider? ou are a general partner; urities; and any managing mestic support obligations,
[✓	No Yes. List all payme	nts to an insider		Dates of	Total amount	Amount you	Reason for this payment
					payment	paid	still owe	
	•	Insider's Name						
		Number Street						
	•	City	State Zi _l	p Code				
	•	Insider's Name						
	•	Number Street						
		City	State Zi _l	p Code				
iı	nsid					payments or trans	fer any property or	account of a debt that benefited an
[✓	No Yes. List all payme	-	-	y air inoloci.			
L	_	res. List all payme	nis triat benemet	an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
					,	•		Include creditor's name
		Insider's Name						
	•	Number Street						
	•	City	State Zi _l	p Code				
	•	Insider's Name						
	•	Number Street						
		City	State Zi _l	o Code				

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Deb	tor 1	Steve First Name	R Middle Name		McAlister Last Name	c	Case number (if	known)	
Part	4.		Actions, Repossess	ions. a		·s			
9.	With List a	in 1 year before yo	u filed for bankruptcy, w	ere you	a party in any laws	uit, court actio			ing? or custody modifications, and
		No Yes. Fill in the detail	S.						
1				Nature	of the case	Court or a	agency		Status of the case
		Case title				Court Nan	ne		Pending On appeal
		Case number				NumberSt			On appeal Concluded
						City	State	7in Codo	
		Case title				City		Zip Code	Pending
		Case number				Court Nam			On appeal Concluded
						NumberSt	reet		Considera
						City	State	Zip Code	
		No. Go to line 11. Yes. Fill in the infor	mation below.		Describe the prop	erty		Date	Value of the property
		Creditor's Name			Explain what happ	ened			
		Number Street			Property was re	nossessed			
					Property was fo	reclosed.			
		City	State Zip Code		Property was g		or levied.		
					Describe the prop	erty		Date	Value of the property
		Creditor's Name							<u> </u>
		Number Street			Explain what happ	ened			
					Property was re	reclosed.			
		City	State Zip Code		Property was g		or levied.		

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Deb	tor 1	Steve First Name	R Middle Name	McAlister Last Name	Case number (if known)		
11.		hin 90 days before you filed ounts or refuse to make a pa			nk or financial institution, s	et off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account nu	ımber: XXXX-		
		City State	Zip Code				
12.		hin 1 year before you filed foointed receiver, a custodian		of your property in the p	ossession of an assignee f	or the benefit of o	creditors, a court-
		No Yes					
Part		List Certain Gifts and					
13.	Wi	thin 2 years before you filed		ou give any gifts with a to	tal value of more than \$600	per person?	
		Yes. Fill in the details for ea Gifts with a total value of per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the	ne Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave the	ne Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

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Deb	tor 1	Steve First Name	R Middle Name	McAlister Last Name	Case number (if known)		
14.	Wit	hin 2 years hefore you fi	iled for hankruntey did	you give any gifts or contrib	outions with a total value of	more than \$600	to any charity?
1-7.		No	ned for bank uptcy, did	you give any gires or continu	duons with a total value of	more than \$000	io arry criarity:
	Ħ	Yes. Fill in the details for	each gift or contribution.				
		Gifts or contributions that total more than \$6		Describe what you cont	ributed	Date you contributed	Value
		Charity's Name		_			
				_			
		Number Street					
		City State	e Zip Code	-			
Part	6:	List Certain Losses	3				
	gam	No Yes. Fill in the details. Describe the property you how the loss occurred	you lost and	Describe any insurance Include the amount that in pending insurance claims	surance has paid. List	Date of your loss	Value of property lost
				A/B: Property.			
		ut seeking bankruptcy o ude any attorneys, bankrup No Yes. Fill in the details.		credit counseling agencies for		cruptcy. Date payment	Amount of
				transferred	any property	or transfer was made	payment
		Semrad Law Firm		Attorney's Fee - 0.00		11/18/2016	\$0.00
		Person Who Was Paid 11101 S. Western Avenue	<u>.</u>				
		Number Street	,				
		Chicago Illino	is 60643				
		City State					
		Email or website address	3				
		Person Who Made the Pa	ayment, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	e Zip Code				
		Email or website address	3				
		Person Who Made the Pa	ayment, if Not You				

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Deb	tor 1		R	McAlister	Case number (if known)	
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed for you deal with your creditors not include any payment or trans No Yes. Fill in the details.	s or to make payments	to your creditors?	our behalf pay or transfer	any property to any	one who promised to
	ш	res. I ili ili tile detalis.		5 14 1 1		5.4	
				Description and value of transferred	any property		Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ude both outright transfers and sfers that you have already listed No Yes. Fill in the details.					Do not include gifts and
				Description and value of property transferred		ny property or eceived or debts pai e	Date id transfer was made
		Person Who Received Transf	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transf	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you filed ese are often called asset-prote		ou transfer any property to a	self-settled trust or simi	ilar device of which y	you are a beneficiary?
		No Yes. Fill in the details.					
	Ц	163. Fill III the details.		Description and value o	the property transferred	d	Date transfer was made
		Name of trust					

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Debtor 1	Steve First Name	R Middle Name	McAlister Last Name	Case number (if known)	
Part 8:	•		ruments, Safe Deposit B	oxes, and Storage Units	
20. Wi	ithin 1 year before you filed for	bankruptcy, wer	re any financial accounts or ins	truments held in your name, or for osit; shares in banks, credit unions, but	
∠	No Yes. Fill in the details.				
			Last 4 digits of account number	Type of account or instrument	Date Last balance before closed, sold, moved, or transfer transfer
	First Saving Bank of Heqewiso Person Who Was Paid	ch	XXXX-8972	✓ Checking ☐ Savings	08//05/2016 \$10.00
	Number Street			Money market Brokerage Other	
	City State	Zip Code			
	Person Who Was Paid		XXXX-	Checking Savings	·
	Number Street			☐ Money market ☐ Brokerage	
	City State	Zip Code		Other	
	you now have, or did you hav ner valuables? No Yes. Fill in the details.	e within 1 year b	efore you filed for bankruptcy, a Who else had access to it?	Describe the conten	
	Name of Financial Institution		Name		☐ No ☐ Yes
	Number Street		Number Street		165
	City State	Zip Code	City State Zi	p Code	
22. Ha	•		ce other than your home within	1 year before you filed for bankru	ptcy?
✓	No Yes. Fill in the details.		·		
	•		Who else had access to it?	Describe the conten	Do you still have it?
	Name of Storage Facility		Name		☐ No ☐ Yes
	Number Street		Number Street		
	City State	Zip Code	City State Zi	p Code	

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ontrol any proj	perty that some	one eise owns	or include any	property you b	orrowed from, are storing for, or floid if	i trust ioi
e details.						
		Where is t	he property?		Describe the contents	Value
		Number Ctr	root			
TIE		Number Su	eet			
eet						
		City	State	Zip Code		
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Sidle	Zip Code					
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uses, and procee	edings that you kn	now about, rega	rdless of when	they occurred.		
nental unit noti	ified you that yo	u may be liab	le or potential	ly liable under o	or in violation of an environmental law?	
e details.						
		Governme	ental unit		Environmental law, if you know it	5
						Date of
		Covernmen				notice
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Deb	tor 1	Steve		R	McAlister	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	, in any judio	cial or administr	ative proceeding under	any environmenta	al law? Include settlements and order	' S.
			,, ,			,		-
	일	No						
	Ш	Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
		0 (11)						case
		Case title						Pending
					Court Name			
					Ni. wala au Otura at			On appeal
		Case number			Number Street			Concluded
					City State	Zip Code		
		_			City State	Zip Code		
Part	11:	Give Details A	bout Your	Business or	Connections to Ar	y Business		
27.	Witl	nin 4 years before	you filed for	bankruptcy, dic	l you own a business or	have any of the fo	ollowing connections to any business	s?
		Δ sole propriet	tor or salf-ami	nloved in a trade	profession, or other activit	v either full-time or	nart-time	
				· -	c) or limited liability partners		partune	
				ity company (LLC) or inflited liability partiters	Silip (LLF)		
		A partner in a						
				ging executive of				
		An owner of a	t least 5% of t	ne voting or equit	ty securities of a corporation	n		
	✓	No. None of the abo	ove applies. G	So to Part 12.				
		Yes. Check all that	apply above a	and fill in the detai	ls below for each business			
					Describe the natu	re of the busines	s Employer Identification r	number Do not
							include Social Security n	
							EIN:	
		Business Name						
					_		Dates business existed	
		Number Street			Name of account	ant or bookkeepe		
					_		From To	
		City	State	Zip Code			11011110	
					Describe the natu	ire of the busines		
							include Social Security n	umber or ITIN.
		Dunings No.			_		EIN:	
		Business Name						
		Number Street					Dates business existed	
		Mariner Street			Name of account	ant or bookkeepe		
		City	Stata	Zip Code		·	From To	
		City	State	Zip Code				
					Describe the natu	ire of the busines		
							include Social Security n	umber or ITIN.
		Business Name			_		EIN:	
		Business Name						
		Number Street					Dates business existed	
		Mariner Street			Name of account	ant or bookkeepe		
		City	Ctoto	7in 0		,	From To	
		City	State	Zip Code				

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Debto			R	McAlister	Case number (if known)
	First Name		Middle Name	Last Name	
	creditors, or	other parties.	or bankruptcy, did y	ou give a financial statemer	nt to anyone about your business? Include all financial institutions,
	Yes. Fill i	n the details below.			
				Date issued	
				MM/DD/YYYY	
	Name			MIM/DD/YYYY	
	Numbe	r Street			
	City	State	Zip Code		
Part 1	2: Sign E	selow			
tr	ue and corre ankruptcy ca	ect. I understand that ase can result in fine	at making a false sta s up to \$250,000, or	atement, concealing propert	nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	•	/s/ Steve McA			
		Signature of Debt	or 1		Signature of Debtor 2
		Date 11/18/2016			Date
D	id vou attac	h additional pages t	o Your Statement o	of Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
_	-	aaa pagee i			
Ľ	∠ No				
	Yes				
D	id you pay o	r agree to pay some	one who is not an a	attorney to help you fill out b	ankruptcy forms?
Г	No				
Ē	Yes. Name	e of person			Attach the Bankruptcy Petition Preparer's Notice,
_		1			Declaration, and Signature (Official Form 119).

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Fill in this inforr	nation to identify your cas	e:		
Debtor 1	Steve	R	McAlister	
	First Name	Middle Name	Last Name	
Debtor 2				Check if this is:
(Spouse, if filing	First Name	Middle Name	Last Name	An amended filing
United States E	Bankruptcy Court for the:	Northern	District of Illinois	A supplement showing post-petition chapter 13
			(State)	expenses as of the following date:
Case number				
(If known)				MM / DD / YYYY
	Form 106J-2	_	rate Househol	d of Dobtor 2
Scriedu	ie J-z. Expei	ises for Sepa	nate nousenoi	d of Debtor 2 12/15
one or more de	ependents in common,	list the dependents on bo	oth Schedule J and this form	naintain separate households. If Debtor 1 and Debtor 2 have no. Answer the questions on this form only with respect to

expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Do	escribe Your Household
1.Do you a	and Debtor 1 maintain separate households?
No. [Do not complete this form.
Yes.	

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Fill in this information to identify your case:					
Debtor 1	Steve	R	McAlister		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if fill	^{ing)} First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	Northern	District of Illinois	_	
Case number (If known)	r		(State)	_	

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

- If you are an individual filing under chapter 7, you must fill out this form if:
- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors V information below.	m 106D), fill in the	
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's name: Honor Finance Description of property securing debt: Automobile	Surrender the property. Retain the property and redeem it. ✓ Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	✓ No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.

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Debtor	Steve	R	McAlister	Case number (if		
1	First Name	Middle Name	Last Name	known)		
!-(V	- Un continued Bassassas I Ba			Part 2:		
	r Unexpired Personal Pro		hadula C. Evasutani Cant	ntreate and Unavaired Leases (Official Form 4000) fill in the	_	
informa	For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).					
Des	cribe your unexpired personal	property leases		Will the lease be assumed?		
Less	sor's name:			☐ No ☐ Yes		
	cription of leased erty:					
Less	sor's name:			□ No □ Yes		
	cription of leased erty:					
Less	sor's name:			No Yes		
	cription of leased erty:					
Less	sor's name:			□ No □ Yes		
	cription of leased erty:					
Less	sor's name:			☐ No ☐ Yes		
	cription of leased erty:					
Less	sor's name:			☐ No ☐ Yes		
	cription of leased erty:					
Less	sor's name:			☐ No ☐ Yes		
	cription of leased erty:					
Part 3:	Sign Below					
Unde			ntention about any proper	rty of my estate that secures a debt and any personal		
			4.0			
_	s/ Steve McAlister gnature of Debtor 1	_	Signature	re of Debtor 1		
31	gnature or Debior 1		Signature	e oi denioi i		
Da	ate 11/18/2016 MM/DD/YYYY		Date MI	MM/DD/YYYY		

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Steve R McAlister		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF C	OMPENSATIO	N OF ATTORNEY FO	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and F that compensation paid to me within services rendered or to be rendered is as follows:	one year before the filin	ng of the petition in bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to	accept		\$1,465.00
	Prior to the filing of this statement I	have received		\$0.00
	Balance Due			\$1,465.00
2.	The source of the compensation paid	d to me was:		
	Debtor	Other (speci	ify)	
3.	The source of the compensation paid	d to me is:		
	✓ Debtor	Other (speci	ify)	
4.	I have not agreed to share the all members and associates of my	bove-disclosed compens law firm.	sation with any other person unless	s they are
		w firm. A copy of the ag	on with a other person or persons w greement, together with a list of th	
5.	 In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition bankruptcy; 			
	b. Preparation and filing of any p	petition, schedules, state	ements of affairs and plan which m	nay be required;
	c. Representation of the debtor	at the meeting of credito	ors and confirmation hearing, and a	any adjourned hearings thereof;
6.	By agreement with the debtor(s), the	above-disclosed fee do	pes not include the following service	es:
		CERTIFIC	CATION	
	I certify that the foregoing is a comple ne debtor(s) in this bankruptcy proceed		eement or arrangement for payme	ent to me for representation
	11/18/2016		/s/ Amy Gerstein	
	Date		Signature of Attorney	_
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
, <u> </u>	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign



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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 11/18/2016	
Client August	Client
Attorney 984	

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Debtor 1 Steve First Name	R Middle Name	Mcalister Last Name	Case number (if known)	
	estions for Reporting Purpo			
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 			
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid the No.	pter 7. Do you estima		ty is excluded and administrative creditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,001	-5,000 -10,000 1-25,000	25,001-50,000 50,001-100,000 More than 100,000
^{19.} How much do you estimate your assets to be worth?		\$10,0 \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Part 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,0 \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	I have examined this notition	and I dealers und	or population of manifest the state of	
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is tricorrect. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, of title 11, United States Code. I understand the relief available under each chapter, and I choose to prunder Chapter 7.			ible, under Chapter 7, 11,12, or 13 hapter, and I choose to proceed
VA.APPOINTE TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TO	out this document, I have of	eand I did not pay o otained and read the	r agree to pay someone who a notice required by 11 U.S.C	is not an attorney to help me fill
	I request relief in accordance	e with the chapter o	ftitle 11, United States Code	e, specified in this petition.
	I understand making a false connection with a bankrupto both. 18 U.S.C. §§ 152, 134	cy case can result in	ng property, or obtaining mo fines up to \$250,000, or imp	oney or property by fraud in orisonment for up to 20 years, or
and the second s	/s/ Steve Mcalister Signature of Debtor 1	bellet	×	
	Executed on 11/18/2	2016	Signature of Debt	or 2
		DD / YYYY		MM / DD / YYYY

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Official	Form 106De	eC	
(if known)			
Case number			(State)
United States B	Bankruptcy Court for the:	Northern	District of Illinois
(Spouse, if filing)	First Name	Middle Name	Last Name
Debtor 2	First Name	Middle Name	Last Name
Debtor 1	Steve	R	Mcalister

Check if this is an amended filing

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below					
Did you pay or agree to pay someone who is NOT an attorney to	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?				
☑ No					
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and				
* /s/ Steve Mcalister	×				
Signature of Debtor 1	Signature of Debtor 2				
Date 11/18/2016 MM/DD/YYYY	Date				
	MM/DD/YYYY				

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Debtor 1	Steve First Name	R Middle Name	Mcalister Last Name	Case number (if known)
SECTION AND CONTRACTOR	THE VALUE OF THE PROPERTY OF T	windle iname	Last Name	Company of the Compan
28. Wi	thin 2 years before editors, or other par	you filed for bankruptcy, did ties.	you give a financial state	nent to anyone about your business? Include all financial institutions,
Z	No			
	Yes. Fill in the deta	ails below.		
			Date issued	
	Name		MM/DD/YYYY	_
	Number Street			
	City	State Zip Code		
	_ City	State Zip Code		
Part 12:	Sign Below			
a ba	nkruptcy case can	result in fines up to \$250,00	0, or imprisonment for up	perty, or obtaining money or property by fraud in connection with co 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signatu	re of Debtor 1	Buyers	Signature of Debtor 2
	Date 1	1/18/2016		Date
Did y	you attach addition	al pages to Your Statement	of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
V	No			
	Yes			
Did y	you pay or agree to	pay someone who is not an	attorney to help you fill ou	t bankruptcy forms?
V	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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ebtor	Steve	R	Mcalister	Case number (if
	First Name	Middle Name	Last Name	known)
rt 2:	List Your Unexpir	ed Personal Property Leas	ses	
orma	ition below. Do not lis	property lease that you listed i st real estate leases. Unexpire al property lease if the trustee	d leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	scribe your unexpired	l personal property leases		Will the lease be assumed?
Les	ssor's name:			□ No □ Yes
	scription of leased perty:	and the second of the second o	ramananta, a per regioni dell'anticolo della di tarre altre segment, appropriate della considerazione dell'anticolo della considerazione della considerazion	ordinamental and dischargement of the control of th
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			
Les	sor's name:	Comment of the second attempt processes, a Statistical Commentment of the Sec. Sec. Sec.	a della della commencia della compete specialisti (2000). I 2004 il 2004 il 2004 il 2004 il 2004 il 2004 il 20	□ No □ Yes
	scription of leased perty:			—
Les	sor's name:			□ No □ Yes
	scription of leased perty:			—
Les	sor's name:		Promote i film in Parkellinde Promote de l'est a 15 a 15 a utilità desire à dissession de l'estate de l'estate	□ No □ Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	cription of leased perty:			_
Les	sor's name:	THE THE STATE OF T	от на применя в	□ No □ Yes
	cription of leased perty:			
3:	Sign Below	PRINT THE THE GROUND STAND OF THAT INSPECTALL THE CHECK THE	MARIN (1977) (1977) META EMILLION ELLIZA MARINO (1988) (1987) (1978) (1978) (1978) (1978)	ESC DERVISE OF THE AMERICAN AND AMERICAN TO THE AMERICAN AND AND AMERICAN SET OF THE THE TWO DESTRUCTIONS AND AN AMERICAN
Unde prope	r penalty of perjury, l erty that is subject to	declare that I have indicated an unexpired lease.	my intention about any p	property of my estate that secures a debt and any personal
	/s/ Steve Mcalister gnature of Debtor 1	Michael Michigan Mich	- ★ Sigr	nature of Debtor 1
Da	ate 11/18/2016 MM/DD/YYYY		Date	MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

m re:	Debtor(s)	Case No	Case No.			
		Chapter.	Chapter7			
	VERIF	ICATION OF CREDITOR MAT	RIX			
TI knowledge	he above named Debtors hereby ver e.	ify that the attached list of creditors is tru	ue and correct to the best of their			
Date:	11/18/2016	/s/ Mcalister Jr, St	(A della de			
		Mcalister Jr, Steve				

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Debtor	_	Steve First Name	R Middle Name	Mcalister		Case numbe	er (if known)	***************************************		
	•	irst ivaine	wilddie Name	Last Name		Column A Debtor 1		Column B Debtor 2 or non-filing spo	use	
Do r	not	loyment compens enter the amount i the Social Security A	sation if you contend that the amou Act. Instead, list it here;	unt received was a benefi ↓↓	it	\$0.00				
For For	•	ur spouse		\$0.00 \$0.00						
		·	, .							
bene	efit	under the Social Se	•		sa	\$ <u>0.00</u>				
amo payr inter	oun ner nat	t. Do not include a nts received as a vic	sources not listed above. S ny benefits received under the ctim of a war crime, a crime a errorism. If necessary, list of ow.	ne Social Security Act or against humanity, or	ie					
Tota	al ar	mounts from separ	ate pages, if any.			+\$0.00	, r	+		
11. Ca	ılcı	ulate your total c	urrent monthly income. Ad	d lines 2 through 10 for		\$3,492.33	+			\$3,492.33
	olur	mn. Then add the t	otal for Column A to the total	al for Column B.						
	_									Total current monthly income
Part 2:	-		ther the Means Test Ap							
	_		monthly income for the ye ant monthly income from line	•			Conviling	11 hara	Γ	A 0.400.00
			number of months in a year).				Сору ппе	e 11 here →	<u> </u>	\$3,492.33 X 12
12b			nual income for this part of t						12b.	\$41,907.96
10.0-1	•	- A - A - A							L	
			mily income that applies t	lo you. Follow these ster	ps:					
Filli	n th	ne state in which yo	ou live.	reneration de la company de la						
Fill i	n th	ne number of peop	le in your household.	3						
Fill in hou	n th seh	ne median family in nold.	come for your state and size	of					13.	\$75,454.00
To fi instr	ind uct	a list of applicable tions for this form.	median income amounts, g This list may also be availabl	o online using the link sp e at the bankruptcy clerk	oecific	ed in the separate				
		lo the lines compa		,						
14a.	V	Line 12b is less Go to Part 3.	than or equal to line 13. On	the top of page 1, check	c box	(1, There is no presump	tion of abu	use.		
14b.	· C	Line 12b is more Go to Part 3 and	e than line 13. On the top of I fill out Form 122A-2.	page 1, check box 2, TI	he pr	resumption of abuse is o	letermined	by Form 122A	-2.	
Part 3:	5	Sign Below								
Ву	sig	ning here, I declare	under penalty of perjury that $ extstyle \wedge$	at the information on this	state	ement and in any attach	ments is tr	ue and correct.		
×		s/ Steve Mcaliste	· Maylike		×	Signature of Debtor 2			on the second	
	Da	tte 11/18/2016 MM/DD/YYYY				Date 11/18/2016 MM/DD/YYYY				
			a, do NOT fill out or file Form o, fill out Form 122A-2 and f				TV Y Y Y NO COLON DE	3.5.6		

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	McAlister Jr, Steve R	Case No	Case No.			
	Debtor(s)		Odge No.			
		Chapter.	Chapter7			
	VERIFICAT	TION OF CREDITOR MAT	RIX			
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge					
Date:	11/18/2016	/s/ McAlister Jr.	Steve R			
		McAlister Jr, Ste Signature of Deb	ve R			

Honor Finance PO Box 1817 Evanston , IL 60204

VERIZON NATIONAL RECOVERY P.O. BOX 26055 MINNEAPOLIS , MN 55426

NATIONAL CREDIT MGMT PO BOX 32900 SAINT LOUIS , MT 63132

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL , FL 33313

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , WA 98057

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA , KS 67205

Region Renovations, Inc. 926 E. 150th Street Hammond , IN 46327

Johnson, Gregory 21720 Olivia Chicago Heights , IL 60411

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168

WOW PO Box 4350 Carol Stream , IL 60197 Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter , IL 60181

Direct T.V Po Box 5007 Carol Stream , IL 60197

Nicor Gas PO Box 5407 Carol Stream , IL 60197

Illinois Tollway PO Box 5544 Chicago , IL 60680

US Cellular Dept 0205 Palatine , IL 60055

Sprint P O Box 629023 El Dorado Hills , CA 95762

Aberdeen Apartments 8680 WALNUT GROVE BEND Camby , IN 46113

USA LOANS 13543 Cicero Ave Crestwood, IL 60445

QC Lenders PO Box 5598 Elgin , IL 60121

Community Hospital - Munster PO Box 3602 Munster , IN 46321

Franciscan St. Margaret Health - Hammond 5454 Hohman Ave Hammond , IN 46320 Ingalls Memorial Hospital PO BOX 3397 Chicago , IL 60654-0397

JD Byrider 6539 Ogden Ave Berwyn , IL 60402

IBN LLC 241 Ogden Street Hammond , IN 46320

Midwest Title Loans 2941 W 159th St Markham , IL 60428